

COUNTY OF MAUI
DEPARTMENT OF PLANNING
250 SOUTH HIGH STREET
WAILUKU, MAUI, HAWAII 96793
TELEPHONE: (808) 270-7735 FAX: (808) 270-7634

MOLOKAI PLANNING COMMISSION
CONDITIONAL PERMIT

SOURCE OF LEGAL AUTHORITY: Chapter 19.40, as amended, Maui County Code, 1980.

INFORMATIONAL SHEET

A Conditional Permit Application may be filed for proposed uses that are similar or related to those uses permitted within the given use zone and is for a limited period of time.

Upon submittal of the Conditional Permit Application, it will be reviewed for completeness.

Upon certification of completeness, a hearing will be scheduled with the Molokai Planning Commission to review and act upon the request.

Between the date of certification of completeness and Planning Commission hearing, the following must be completed:

APPLICANT

Notification of hearing date by certified mail. (Notification letter to owners and lessees within 500 feet of the subject parcel(s) are to be mailed after application accepted, and public hearing scheduled. A location map of the proposed project shall be sent with the notice (form attached). Said notification shall be done 30 days prior to the public hearing. The applicant shall submit an affidavit to the Director on a form provided by the Department certifying that notice, as required herein has been provided.

Please note that prior to mailing said Notice, the applicant shall reverify the listing with the Real Property Tax Records of the County of Maui.

PLANNING DEPARTMENT

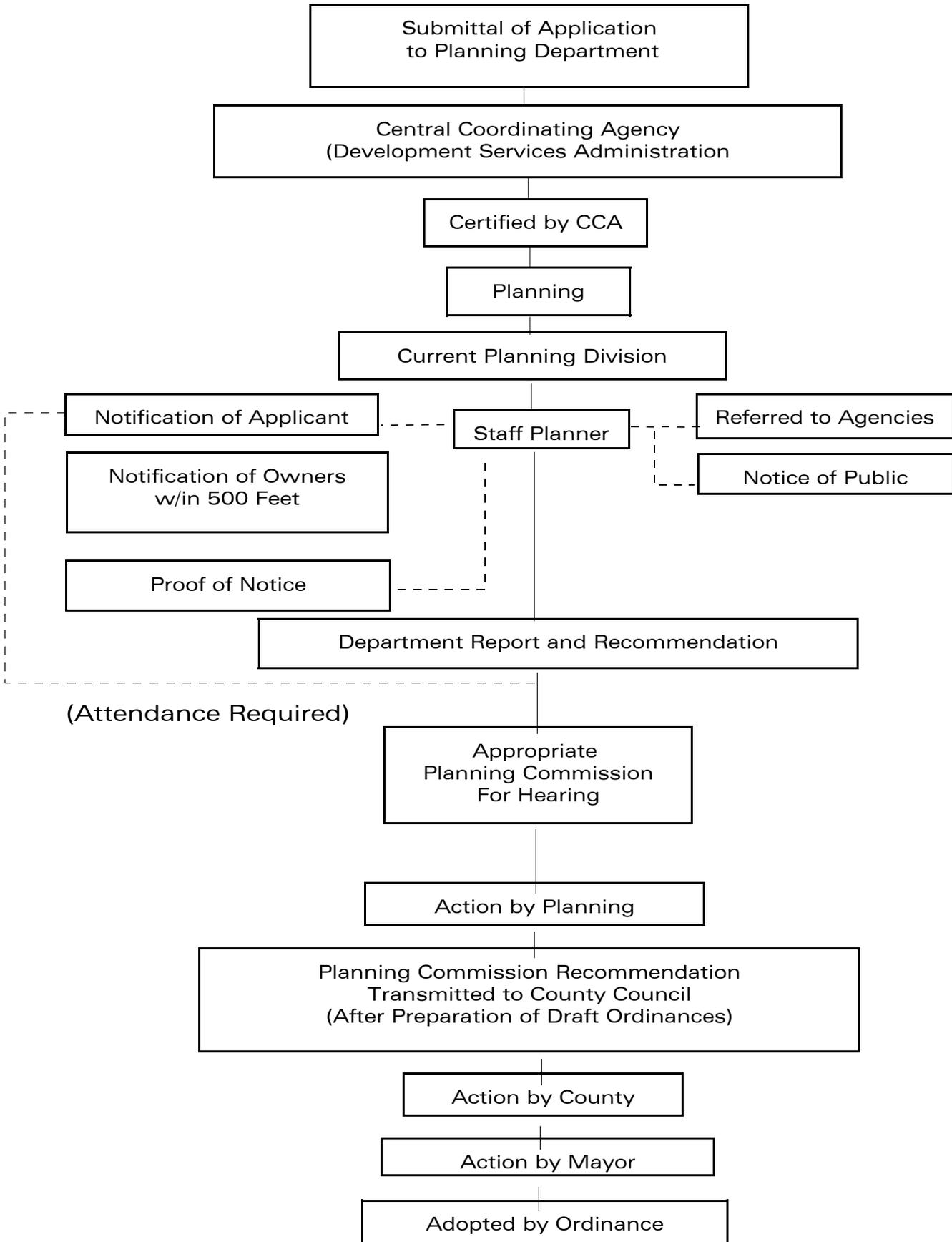
Referral to other agencies for comments.

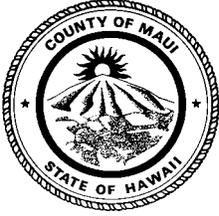
Preparation of report and recommendation.

Publish public hearing notice in a newspaper of general circulation in the County published at least twice weekly at least 30 days prior to hearing.

CONDITIONAL PERMIT

FLOW CHART





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MOLOKAI PLANNING COMMISSION
APPLICATION TYPE: CONDITIONAL PERMIT

DATE: _____

PROJECT NAME: _____ VALUATION: \$ _____

PROPOSED DEVELOPMENT: _____

TAX MAP KEY NO.: _____ CPR/HPR NO.: _____ LOT SIZE: _____

PROPERTY ADDRESS: _____

OWNER: _____ PHONE:(B) _____ (H) _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

OWNER SIGNATURE: _____

APPLICANT: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE (B): _____ (H): _____ FAX: _____

APPLICANT SIGNATURE: _____

AGENT NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE (B): _____ (H): _____ FAX: _____

EXISTING USE OF PROPERTY: _____

CURRENT STATE LAND USE DISTRICT BOUNDARY DESIGNATION: _____

COMMUNITY PLAN DESIGNATION: _____ ZONING DESIGNATION: _____

OTHER SPECIAL DESIGNATIONS: _____

CONDITIONAL PERMIT APPLICATION
REQUIRED SUBMITTALS

- ___ 1. Evidence that the applicant is the owner or lessee of record of the real property to be reclassified. ("lessee" means a lessee holding under recorded lease, the unexpired term of which is more than five years from the date of filing of any application or from the date that any action is taken by the commission or the council to initiate Conditional Use Permit.)
- ___ 2. A notarized letter of authorization from the legal owner if the applicant is not the owner.
- ___ 3. List of landowners and recorded lessees of real property within a 500-foot radius of the subject parcel. This list should be obtained from the most current available list at the Maui County Department of Finance, Real Property Division. This list should include the tax map key numbers and the names and addresses of all owners and lessees to be notified, including a map drawn to scale, clearly defining the 500 feet notification boundary and the parcels affected.
- ___ 4. Original + 1 copy of the completed Application Form.
- ___ 5. Reasons justifying the request (original +1 copy).
- ___ 6. Original + 1 set of a plot plan of the property, drawn to scale, to include but not be limited to, existing and proposed structure(s), (architectural plans to include elevation, sections, floor plan, etc.), driveway access, parking area, etc.
- ___ 7. Photographs (preferably slides) of the project site.
- ___ 8. **Non-refundable filing fee** (see Fee Schedule, Table A), payable to *County of Maui, Director of Finance*.

An original + 1 collated copy of Items 4-6 should be submitted for Planning Department's review as to completeness for agency review. When the application is deemed complete for agency review, the Planning Department will contact the applicant to submit the number of copies needed for agency transmittal.

Date: _____

TO: Owner/Lessee

Please be informed that the undersigned has applied to the _____
Planning Commission of the County of Maui for a Conditional Permit at the following
parcel(s):

1. Tax Map Key: _____
2. Location: In the vicinity of _____
3. Zoning Designation: _____
4. Proposed Use: _____

THIS SECTION TO BE COMPLETED BY THE PLANNING DEPARTMENT:

PLANNING COMMISSION: _____

PUBLIC HEARING DATE: _____

TIME: _____

PLACE: _____

Attached please find a map identifying the location of the specific parcel(s) being considered in the above-referenced request.

The hearing is held under the authority of Chapter 92, Hawaii Revised Statutes, Title 19 of the Maui County Code and the appropriate Planning Commission Rules.

Testimony relative to this request may be submitted in writing to the appropriate Planning Commission, c/o the Maui Planning Department, 250 South High Street, Wailuku, Maui, Hawaii, 96793, or presented in person at the time of the public hearing.

Information relative to the application is available for review at the Planning Department, 250 South High Street, Wailuku, Maui, Hawaii; Telephone: (808) 270-7735; toll free from Molokai 1-800-272-0117, Extension 7735; and toll free from Lanai 1-800-272-0125, Extension 7735.

Name of Applicant- Please print

Signature

Address

() Telephone

ATTACHMENT E

NOTARIZED AFFIDAVIT OF MAILING OF
NOTICE OF PUBLIC HEARING

_____, being first duly sworn, on oath, deposes and says:

1. Affiant is the applicant for a _____
for land situated at _____,
TMK: _____
2. Affiant did on _____, _____, deposit in the
United States mail, postage prepaid, by certified or registered mail, return
receipt requested, a copy of a Notice of Hearing with location map, a
copy of which is attached hereto as "Exhibit A" and made a part here of,
addressed to each of the persons identified in the list of recorded owners
and lessees identified as "Exhibit B," attached hereto and made a part
hereof.
3. Thereafter, there was returned to the office of Affiant the United States
Post Office certified or registered mail receipts and return receipts which
are attached hereto as "Exhibit C" and made a part hereof.

Further, Affiant sayeth naught:

Subscribed and sworn to before me this
____ day of _____, _____.

Notary Public, State of Hawaii
My commission expires: _____

**COUNTY OF MAUI
DEPARTMENT OF PLANNING**

ZONING AND FLOOD CONFIRMATION REQUEST FORM

APPLICANT: _____ PHONE NO.: _____

ADDRESS: _____

PROJECT NAME: _____

ADDRESS AND/OR LOCATION: _____

TMK NUMBER(S): _____

ZONING INFORMATION

STATE LAND USE _____ COMMUNITY PLAN _____

COUNTY ZONING _____ SPECIAL DISTRICT _____

OTHER _____

FLOOD INFORMATION

FLOOD HAZARD AREA* ZONE _____

BASE FLOOD ELEVATION _____ mean sea level, 1929 National Geodetic Vertical Datum or for Flood Zone A0, FLOOD DEPTH _____ feet.

FLOODWAY [] Yes or [] No

FLOOD DEVELOPMENT PERMIT IS REQUIRED [] Yes or [] No

* For flood hazard area zones B or C; a flood development permit would be required if any work is done in any drainage facility or stream area that would reduce the capacity of the drainage facility, river, or stream, or adversely affect downstream property.

FOR COUNTY USE ONLY

REMARKS/COMMENTS: _____

- Additional information required.
- Information submitted is correct.
- Correction has been made and initialed.

Reviewed and Confirmed by:

Signature

Date